

ROSS MILLER Secretary of State 206 North Carson Street Carson City, Nevada 89701-4299 (775) 684 5708 Website: www.nvsos.gov

Qualification to do Business in Nevada

(PURSUANT TO NRS CHAPTER 80)

USE BLACK INK ONLY - DO NOT HIGHLIGHT			ABOVE SPAC	E IS FOR OFFICE USE ONLY
1. Name of Corporation: (must be the same as shown on the certificate of existence)				
2. State of Incorporation:				
3. Registered Agent for Service of Process: (check only one box)	Commercial Registered Agent: Name Noncommercial Registered Agent (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity			
		-		Nevada
	Street Address		City	Zip Code
				Nevada
	Mailing Address (if different from	n street address)	City	Zip Code
4. Authorized Stock: (set forth the total authorized stock indicating number of par shares, par value per share and/or number of no par shares; mark appropriate box if entity is a nonprofit corporation with or without stock; submit required documentation to support statement; stock statement must match documentation exactly)	(b) Par value per s			his entity is a nonprofit, on-stock corporation.
5. Purpose: (required; continue on additional page if necessary)	The purpose of the corporation shall be:			
6. Name, Title and Signature of Officer Making Statement:	Name Title of Officer		X Officer Signature	
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointm X Authorized Signature of Regis		ent for the above named En	ntity. Date